LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

To Be Filed By:

LOBBYISTS (Sec. 67-6619)

 $\begin{array}{c} \textbf{Page} \underline{\hspace{0.5cm}} \text{ of } \underline{\hspace{0.5cm}} \textbf{Page(s)} \\ \textbf{THIS SPACE FOR OFFICE USE ONLY} \end{array}$

06 JAN 24 PM 5: 03

(Type or print clearly in black ink)					STATE UT TUANU									
			at bottom of page											
Lobbyist's name and permanent business address							Date prepared					Period covered		
Dar Olberding of						. /					year ending			
5454 W Central KOV.						Jan 17/06				1				
Emmett Id. 83617										1 '	(M o.)	(Day)	(Yr.)	
5 m	mei	ال كما	83617											
Item 1	Totals	of all reportab	le expenditures made or	incurred b	y Lobb	yist or b	y Lobby	ist's Emp	oyer on	behalf of I	obbyis	st's Employ	yer.	
Cat	tegory of Ex	penditure				y each emp	oloyer (Id	entify emp	loyers,	under				
	ed Personal Livi Pertaining to Lo	* Total Amount for All Employers			of page.)									
Do	Not Have to be	Reported	All Employers	Emplo	yer No.	1 Employer No. 2			Emp	Employer No. 3 E			r No. 4	
Enterta Food a	inment nd Refreshm	ent	\$	\$ 2 5	<u>2. ه</u>	<u>o</u> 0 \$		<u>ა</u>	s		_ :	\$		
Living	Accommoda	ations		•										
Advert	ising													
Travel											_			
Telepho	one													
rotopiii											-			
Other I	Expenses or	Services							l					
		Total	s	\$ 27	0,0	5 6 S	·	<u> </u>	\$		_ ;	\$		
*1	When the num	her of employers	you are reporting for requ	ires multiple	I -2 for	ms to be	filed a tot	al amount f	or all amn	lovers show	 d be en	tered on Pag	na 1	
Item											id to cir	tered on 1 ag	30 1.	
2					nount					ic Offic	ials in Grou	p		
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	Continued on	attached page(s)			•									
INSTRUCTIONS								E	mployer(s	s) Name(s) a				
When the III Glade Command and III distribution and							1 Val	انی ه	4.N <	total		- and		
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.							Q. D			370	٧			
Filing deadline: Annual report is due on January 31st.							Med	ina l	ع م	merg . a	U	Box.	37 1037	
TO	BE FILED						7	<u>, , , , , , , , , , , , , , , , , , , </u>	٠-١ ر					
Ben Ysursa														
Secretary of State PO Box 83720														
Boise, ID 83720-0080											-			
Phone: (208) 334-2852 Fax: (208) 334-2282						No.4								
l						ı								

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.											
	Date		Amount		Name of Legislator Receiving or Benefited							
Item 5	or He	ouse Bill,		tion, the number of the Senate r legislative activity in which pposing.	1	LEGISLATIVE SUB	Code	Subject				
Subjec				Appropriation Bill Number	01	Agriculture, horticulture, farming, and livestock	17	Health service, medicine, drugs and controlled substances, health				
_(from	table)	Legislat	ive Ident, Number	and Section Number	02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county	18 19 20 21 22 23 24 25 26 27 28 29 30	insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)				
						Employer No. 1 signature Employer No. 2 signature	1	23 Jan 06 Date 24 Jan 06 Date Date				
				e above is a true, complete and on 67-6624 Idahe Code.		Employer No. 3 signature Employer No. 4 signature		Date				
					,	Employer No. 4 signature		Date				